## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48					
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼					
ESAFund						
	C C00489856					
Check if 24-hour report						
Full Name of Payee	Date of Public Distribution/Dissemination					
McCarthy Hennings Media, Inc.	11 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
Mailing Address 1850 M Street, N.W., #235	Amount					
City State Zip Code	7387.93					
Washington DC 20004	Transaction ID : SE.7287 Date of Disbursement or Obligation					
Purpose of Expenditure media production Category/ Type	M = M / D = D / Y = Y = Y					
Name of Federal Candidate Support Office	Sought: House District:					
Kennedy, John Neely, , ,	President Senate State: LA					
Calendar Year-To-Date Per Election for Office Sought  Disbut 2016	rsement For: Primary General  ✓ Other (specify) ► Runoff					
Full Name of Payee McCarthy Hennings Media, Inc.	Date of Public Distribution/Dissemination  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
Mailing Address 1850 M Street, N.W., #235	Amount					
City State Zip Code	7387.93					
Washington DC 20004	Transaction ID : SE.7288 Date of Disbursement or Obligation					
Purpose of Expenditure media production Category/ Type	M = M / D = D / Y = Y = Y					
Name of Federal Candidate Support Office	Sought: House District:					
Campbell, Foster, Lonnnie, , II	President Senate State: LA					
Calendar Year-To-Date Per Election for Office Sought  Disbut 2016	rrsement For: Primary General  ✓ Other (specify)   Runoff					
(a) SUBTOTAL of Itemized Independent Expenditures	14775.86					
(b) SUBTOTAL of Unitemized Independent Expenditures						
(c) TOTAL Independent Expenditures	7 7 7					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.						
Watkins, Nancy H., , ,  [Electronically Filed] Date	1 18 2016					
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## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	IN EXILIE	TI OILE		PAGE 2 OF 3 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEO	C IDENTIFICATION NUMBER ▼
ESAFund			C	C00489856
Check if 24-hour report 48-hour report	X New rep	port Amends repo	ort filed on	/ D D / Y Y Y Y Y
Full Name of Payee			Date of Pu	ublic Distribution/Dissemination
Mentzer Media Services, Inc.			M M M	17 2016
Mailing Address 600 Fairmount Avenue, #306			Amount	
City	State	Zip Code		150000.00
Towson	MD	21286		on ID : SE.7276 isbursement or Obligation
Purpose of Expenditure media placement		Category/ Type	M = M	/ D = D / Y = Y = Y
Name of Federal Candidate		<b>✗</b> Support	Office Sought:	House District:
Kennedy, John Neely, , ,		Oppose	President	Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	-,,	0.00	Disbursement Fo 2016 X Other	r: Primary General (specify) ► Runoff
Full Name of Payee			Date of P	ublic Distribution/Dissemination
Mentzer Media Services, Inc.			M M M	17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 600 Fairmount Avenue, #306			Amount	
City	State	Zip Code	— r	150000.00
Towson	MD	21286		n ID : SE.7277 isbursement or Obligation
Purpose of Expenditure media placement		Category/ Type	M = M	/ D D / Y Y Y Y Y
Name of Federal Candidate		Support	Office Sought:	House District:
Campbell, Foster, Lonnnie, , II		<b>x</b> Oppose	President	Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		0.00	Disbursement For 2016 Cother	or: ☐ Primary ☐ General  (specify) ► Runoff
(a) SUBTOTAL of Itemized Independent Expendi	tures		<b>•</b>	300000.00
(b) SUBTOTAL of Unitemized Independent Exper	nditures			
				4 4
(c) TOTAL Independent Expenditures			•	7
Under penalty of perjury I certify that the independent, or at the request or suggestion of, any canon party committee) any political party committee or	lidate or authorize			
Watkins, Nancy H., , , Signature	[Electron	nically Filed] Date		8 2016
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## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	in Exi End			PAGE 3 OF 3 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
ESAFund				C C00489856
				0 200 10000
Check if 24-hour report 48-hour report	X New rep	port Amends repo		/
Full Name of Payee  Montzor Modia Sorvices Inc			Date	of Public Distribution/Dissemination
Mentzer Media Services, Inc.			I N	11 17 2016
Mailing Address 600 Fairmount Avenue, #306			Amou	ınt
City	State	Zip Code	$ \Gamma$	70990.50
Towson	MD	21286		saction ID : SE.7281
Purpose of Expenditure		Category/		of Disbursement or Obligation
media placement		Type		
Name of Federal Candidate		<b>x</b> Support	Office Sough	nt: House District:
Kennedy, John Neely, , ,		Oppose	Preside	ent Senate State: LA
Calendar Year-To-Date		0.00	Disbursemen	nt For: Primary General
Per Election for Office Sought	7 7	0.00		Other (specify)  Runoff
Full Name of Payee  Montzer Media Services Inc.			Date	of Public Distribution/Dissemination
Mentzer Media Services, Inc.				11 17 2016
Mailing Address 600 Fairmount Avenue, #306			Amou	int
			711100	ant
City	State	Zip Code		70990.50
Towson	MD	21286		action ID : SE.7282 of Disbursement or Obligation
Purpose of Expenditure media placement		Category/		M   M   / D   D   / Y   Y   Y   Y
		Type		
Name of Federal Candidate		Support	Office Sough	
Campbell, Foster, Lonnnie, , II		<b>x</b> Oppose	Presid	lent Senate State: LA
Calendar Year-To-Date		0.00	Disbursemer	nt For: Primary General
Per Election for Office Sought		0.00		Other (specify) ►Runoff
			_	
(a) SUBTOTAL of Itemized Independent Expendit	ures		·· <b>&gt;</b>	141981.00
(b) SUBTOTAL of Uniternized Independent Exper	nditures			
(b) ODDIOIAL OF ORNORING Macportain Lips.	iditaros			7 7 7
(c) TOTAL Independent Expenditures				456756.86
				4 4
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any cand party committee) any political party committee or	didate or authorized			
Watkins, Nancy H., , ,	[Electroi	nically Filed] Date	e 11	18 2016
Signature		_		